PRELIMINARY DRAFT No. 3770

PREPARED BY LEGISLATIVE SERVICES AGENCY 2005 GENERAL ASSEMBLY

DIGEST

Citations Affected: IC 20-34.

Synopsis: Title 20 recodification. Article 34. (New cite order, with

queries.)

Effective: July 1, 2005.



A BILL FOR AN ACT to amend the Indiana Code concerning education.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. IC 20-34 IS ADDED TO THE INDIANA CODE AS
2	A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1,
3	2005]:
4	ARTICLE 34. STUDENT HEALTH AND SAFETY
5	MEASURES
6	Chapter 1. Acquired Immune Deficiency Syndrome Advisory
7	Council
8	[20-8.1-11-1] Sec. 1. As used in this chapter, "AIDS" means the
9	communicable disease known as acquired immune deficiency
0	syndrome.
. 1	[20-8.1-11-2] Sec. 2. As used in this chapter, "council" refers to the
2	an AIDS advisory council established by this chapter.
3	[20-8.1-11-3] Sec. 3. (a) The governing body of α each school
4	corporation shall establish a council.
5	(b) Subsection (a) does not apply to a school corporation that has:
6	(1) established an advisory committee composed of parents,
7	students, teachers, administrators, and representatives of the state
8	department of health; and
9	(2) met and identified educational materials and resources
20	reflecting community standards on AIDS before February 15,
21	1988.
22	[20-8.1-11-4] Sec. 4. The council consists of thirteen (13) members.
23	The governing body shall appoint all the members of the council.
24	[20-8.1-11-5] Sec. 5. One (1) member of the council must be:
2.5	(1) a representative of the local board of health or state
26	department of health; and
27	(2) trained in the area of dangerous communicable diseases,
28	including AIDS.
29	[20-8.1-11-6] Sec. 6. The remaining members must include the
0	following persons: individuals:
31	(1) Two (2) students.



1	(2) Two (2) teachers.
2	(3) Two (2) parents or guardians of children who attend public
3	schools governed by the school corporation. governing body.
4	(4) Two (2) representatives of school administrators.
5	(5) Two (2) representatives of the health care professions, one (1)
6	of whom must be a physician licensed under IC 25-22.5.
7	(6) Two (2) citizens who reside in the community served by the
8	school corporation.
9	[20-8.1-11-7] Sec. 7. Each The term of a council member has a
0	term of is two (2) years, beginning upon appointment. If a successor is
1	not appointed at the end of the term, the term continues until a
2	successor is appointed.
3	[20-8.1-11-8] Sec. 8. The council shall, at its first meeting of each
4	year, elect a chairman, chairperson, vice chairman, chairperson, and
5	secretary.
6	[20-8.1-11-9] Sec. 9. The officers term of an officer elected under
7	section 8 of this chapter: have terms that begin
8	(1) begins upon election; and end
9	(2) ends upon the election of a successor.
0	[20-8.1-11-10] Sec. 10. The governing body of the school
1	corporation shall furnish the council with the necessary staff to conduc
2	its the council's business.
3	[20-8.1-11-11] Sec. 11. At the first meeting of the each year, a
4	representative of the local board of health or state department of health
5	or a person an individual approved by the state department of health
6	shall instruct the members of the council on the source, transmission
7	and prevention of AIDS.
8	[20-8.1-11-12] Sec. 12. At the second meeting of the each year, the
9	council shall hold a public meeting and solicit testimony from members
0	of the community concerning community attitudes and values or
1	matters that affect the instruction on AIDS that is presented within the
2	school corporation.
3	[20-8.1-11-13] Sec. 13. The council shall do the following:
4	(1) Identify and study educational materials and resources or
5	AIDS that are available for use in the schools within the schoo
6	corporation.
7	(2) Determine which educational materials and resources are
8	based on sound medical principles and reflect the attitude of the
9	community.
0	(3) Recommend to the school corporation educational materials
1	and resources on AIDS that reflect the standards of the
2	community.
3	[20-8.1-11-14] Sec. 14. The governing body of the school
4	corporation shall consider the recommendations of the advisory
5	council.

PD 3770/DI 71

Chapter 2. Drug-Free Schools Committee



[new] Sec. 1. As used in this chapter, "committee" refers to a drug-free schools committee.

[20-10.1-4-9.2(a)] Sec. 2. Sec. 9.2. (a) To facilitate the establishment of drug-free schools in Indiana, the governing body of each school corporation shall establish a drug-free schools committee for each school in the school corporation.

[20-10.1-4-9.2(b)] Sec. 3. Sec. 9.2. (b) Each committee must consist of not more than fifteen (15) members who represent the following from the school corporation:

(1) School personnel.

- (2) Parents of students.
- (3) Representatives of the community.

[20-10.1-4-9.2(c)] Sec. 4. Sec. 9.2. (c) Appointments to the committee shall must be made in compliance with contractual provisions, discussion procedures, or past practice that apply to the school.

[20-10.1-4-9.2(d)] Sec. 5. Sec. 9.2. (d) Each committee shall do the following:

- (1) Develop a drug-free school plan that:
 - (A) requires each school to collect and report drug related activities in the school, including suspensions, expulsions, exclusions, police actions, or any other type of drug related behavior; and
 - (B) addresses ways to eliminate illegal drugs and drug related behavior in schools.
- (2) Oversee the implementation of the school plan.
- (3) Oversee the implementation of the curriculum under section 9.1 of this chapter. IC 20-30-5-11.

Chapter 3. Health and Safety Measures

[20-8.1-7-1] Sec. 1. (a) When the power to make rules for the administration of any a section of this chapter is not specifically granted to a particular board or agency, the state department of health and the Indiana state board of education shall jointly adopt rules. The adoption of any

(b) A rule **adopted** under this chapter shall be in accordance **must comply** with IC 4-22-2. However, the state department of health may prescribe forms for any reports required under this chapter without formal procedures.

[20-8.1-7-2] Sec. 2. (a) Except as otherwise provided, a school child student may not be required to undergo any testing, examination, immunization, or treatment required under this chapter when the child's parent objects on religious grounds. A religious objection does not exempt a child from any testing, examination, immunization, or treatment required under this chapter unless the objection is:

- (1) made in writing;
- (2) signed by the child's parent; and



- (3) delivered to the child's teacher or to the individual who might order a test, an exam, an immunization, or a treatment absent the objection.
- (b) A teacher may not be compelled to undergo any testing, examination, or treatment under this chapter when if the teacher objects on religious grounds. A religious objection will does not exempt an objecting individual from any testing, examination, or treatment required under this chapter unless the objection is:
 - (1) made in writing;

- (2) signed by the objecting individual; and
- (3) delivered to the principal of the school in which the objecting individual teaches.

[20-8.1-7-2.5] Sec. 3. Sec. 2.5. Exception for Child's Health. If any a physician certifies that a particular immunization required by this chapter is or may be detrimental to the child's a student's health, the requirements of this chapter for that particular immunization is inapplicable for that child the student until it the immunization is found no longer detrimental to the child's student's health.

[20-8.1-7-3] Sec. 4. Sec. 3. Medical Inspection. The governing body of a school corporation may provide for the inspection of school children students by a school physician to determine whether any children suffer child suffers from disease, disability, decayed teeth, or other defects which that may reduce their the student's efficiency or prevent them the student from receiving the full benefit of their the student's school work.

[20-8.1-7-4] Sec. 5. Sec. 4. Exemption from Examination. If the parent of a pupil student furnishes a certificate of examination from an Indiana physician at the beginning of a school year, the child student is exempt from any examination which the governing body may require requires under section 3–4 of this chapter. The certificate of examination shall must state that the physician has examined the child student and reported the results of the examination to the parents. parent. The governing body may require a parent to periodically furnish additional certificates. from time to time.

[20-8.1-7-5] Sec. 6. Sec. 5. School Physicians and Nurses. (a) The governing body of a school corporation may appoint one (1) or more school physicians and one (1) or more nurses who are registered to practice nursing in Indiana.

(b) A nurse appointed under this section is responsible for emergency nursing care of children students when an illness or an accident occurs during school hours or on or near school property.

[20-8.1-7-6] Sec. 7. Sec. 6. Medical Personnel; Optional Methods of Appointment. (a) Two (2) or more school corporations may jointly employ one (1) physician, a one (1) health co-ordinator, coordinator, and one (1) or more nurses. School corporations may also employ these the personnel jointly with a civil city or town.



(b) Arrangements under this section shall must be on terms agreeable to all school corporations involved.

[20-8.1-7-7] Sec. 8. Sec. 7. General Duties of School Physician. A school physician shall make prompt examination of all children promptly examine each student who is referred to him. He the physician. The physician shall examine teachers and jaintors janitors and inspect school buildings to the extent required, in his the physician's opinion, to protect the health of pupils students and teachers.

- [20-8.1-7-8] Sec. 9. Sec. 8: (a) If a child student is ill, has a communicable disease, or is infested with parasites, the school principal may send the child student home with a note to the child's student's parent. or guardian. The note must describe the nature of the illness or infestation and, if appropriate, recommend that the family physician be consulted.
- (b) If the parent or guardian of a child student who is sent home under this section is financially unable to provide the necessary medical care, it the medical care shall be provided by a public health facility. If no a public health facility is not available, the township trustee or other an appropriate governmental agency shall provide the necessary relief: care.
- (c) A **child student** who is sent home under this section may be readmitted to the school:
 - (1) when it is apparent to school officials that the **child student** is no longer ill, no longer has a communicable disease, or **is** no longer infested with parasites;
 - (2) upon certification of a physician that the **child student** is no longer ill, no longer has a communicable disease, or **is** no longer is infested with parasites;
 - (3) upon certification of a physician that the child student has a communicable disease, but the disease is not transmissible through normal school contacts; or
 - (4) upon certification by of a Christian Science practitioner, who is listed in The Christian Science Journal, that based on the practitioner's observation the child student apparently is no longer ill, no longer has a communicable disease, or is no longer is infested with parasites.

If school personnel disagree with the certifying physician or Christian Science practitioner as to whether the **child student** should be readmitted to school, the local health officer shall determine whether the **child student** may be readmitted to school.

(d) A person An individual who objects to the determination made by the local health officer under this section may appeal to the secretary commissioner of the state board department of health, who is the ultimate authority. IC 4-21.5 applies to appeals under this subsection.

[20-8.1-7-14] Sec. 10. Sec. 14. (a) A sickle cell anemia test shall be



1	administered to each pupil student when the examining physician or
2	school nurse determines that the test is necessary. The physician shall
3	state on the examination form whether the test was given and, if it was,
4	the result. All positive results shall be filed with the examining
5	physician and the state department of health.
6	(b) The state department of health and the state board of education
7	shall adopt joint rules and regulations concerning sickle cell anemia
8	testing equipment, qualifications for sickle cell anemia testing
9	personnel, and sickle cell anemia testing procedures.
10	(c) Records of all tests administered under this section shall be
11	made and continuously maintained by the state department of health in
12	order to provide information useful in protecting, promoting, and
13	maintaining the health of school children. students.
14	[20-8.1-7-15] Sec. 11. Sec. 15. (a) The governing body of a school
15	corporation may require its pupils students to be tested for lead
16	poisoning.
17	(b) If a child's student's parent states in writing that the parent is
18	financially unable to pay for the a test under this section, and so states
19	in writing, the child student shall be referred to the free clinic or public
20	health facility in the area which that provides services for indigents.
21	(c) The state department of health and the Indiana state board of
22	education shall adopt joint rules concerning lead poisoning testing
23	under this section.
24	(d) Records of all tests administered under this section shall be
25	made and continuously maintained by the state department of health in
26	order to provide information useful in protecting, promoting, and
27	maintaining the health of school children: students.
28	[20-8.1-7-16] Sec. 12. Sec. 16. (a) For purposes of this section,
29	"modified clinical technique" means a battery of vision tests that
30	includes:
31	(1) a visual acuity test to determine an individual's ability to
32	see at various distances;
33	(2) a refractive error test to determine the focusing power of
34	the eye;
35	(3) an ocular health test to determine any external or internal
36	abnormalities of the eye; and
37	(4) a binocular coordination test to determine if the eyes are
38	working together properly.
39	(a) (b) The governing body of each school corporation shall
40	conduct:
41	(1) an annual vision test, using the modified clinical technique,
42	described in subsection (c), of all children each student upon
43	their the student's enrollment in either kindergarten or the first
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PD 3770/DI 71 2005

(2) an annual screening test of the visual acuity of all children

each student enrolled in or transferred to the third grade 3 and

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grade 1; and



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1	eighth grades grade 8 and of all other school children students
2	suspected of having a visual defect.
3	(b) (c) Records of all tests administered under this section shall
4	be made and continuously maintained in order [QUERY: BY
5	WHOM?] to provide information useful in protecting, promoting, and
6	maintaining the health of school children. students. The state
7	department of health and the Indiana state board of education shall
8	adopt joint rules concerning vision testing equipment, qualifications of
9	vision testing personnel, visual screening procedures, and criteria for
10	failure and referral in the screening tests based upon on accepted
11	medical practice and standards.
12	(c) For purposes of this section, "modified clinical technique" means
13	a battery of vision tests that includes:
14	(1) a visual acuity test to determine an individual's ability to see
15	at various distances;
16	(2) a refractive error test to determine the focusing power of the
17	eye;
18	(3) an ocular health test to determine any external or internal
19	abnormalities of the eye; and
20	(4) a binocular coordination test to determine if the eyes are
21	working together properly.
22	[20-8.1-7-16.5] Sec. 13. Sec. 16.5. (a) If a school corporation is
23	unable to comply with section $\frac{16(a)(1)}{12(b)(1)}$ of this chapter, the
24	governing body of the school corporation may, before November 1 of
25	a school year, request from the state superintendent of public
26	instruction a waiver of the requirements of section 16(a)(1) 12(b)(1) of
27	this chapter.
28	(b) The waiver request under subsection (a) must:
29	(1) be in writing;
30	(2) include the reason or reasons that necessitated the waiver
31	request; and
32	(3) indicate the extent to which the governing body of the school
33	corporation attempted to comply with the requirements under
34	section $\frac{16(a)(1)}{12(b)(1)}$ of this chapter.
35	(c) The state superintendent of public instruction shall take action
36	on the waiver request no not later than thirty (30) days after receiving
37	the waiver request.
38	(d) The state superintendent of public instruction may:
39	(1) approve the waiver request;
40	(2) deny the waiver request; or
41	(3) provide whatever relief that may be available to enable the
42	school corporation to comply with the requirements under section
43	16(a)(1) 12(b)(1) of this chapter.
44	(e) If the state superintendent of public instruction approves the

PD 3770/DI 71 2005

waiver request, the governing body of the school corporation shall

conduct an annual screening test of the visual acuity of all children

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each student upon their the student's enrollment in or transfer to the first grade 1.

[20-8.1-7-17] Sec. 14. Sec. 17. Audiometer Tests. (a) The governing body of every each school corporation shall annually conduct an audiometer test or a similar test to determine the hearing efficiency of all school children the following students:

- (1) A student in the first, fourth, seventh and tenth grades, of all grade 1, grade 4, grade 7, and grade 10.
- (2) A student who has transferred school children and of all school children into the school corporation.
- (3) A student who is suspected of having hearing defects.
- **(b)** A governing body may appoint the technicians and assistants necessary to perform the testing required under this section.
- (c) Records of all tests shall be made and continuously maintained [QUERY: BY WHOM?] in order to provide information which that may assist in diagnosing and treating any child's student's auditory abnormality. However, diagnosis and treatment shall be performed only on recommendation of an Indiana physician who has examined the child: student.
- **(d)** The local governing body may adopt rules and regulations for the administration of this section.

[20-8.1-7-18] Sec. 15. Sec. 18. (a) Whenever the test required under section 17 14 of this chapter discloses that the hearing of any child a student is impaired and the child student cannot be taught advantageously in regular classes, the governing body of the school corporation shall provide appropriate remedial measures and correctional devices. The governing body shall advise the child's parents student's parent of the proper medical care, attention, and treatment needed. The governing body shall provide approved mechanical auditory devices and prescribe courses in lip reading by qualified, competent, and approved instructors. The state superintendent of public instruction and the head director of the rehabilitative rehabilitation services bureau of the division of disability, aging, and rehabilitative services shall:

- (1) cooperate with school corporations to provide this assistance they shall also under this section; and
- (2) provide advice and information to assist school corporations in complying with this section.

The local governing body may adopt rules and regulations for the administration of this section.

(b) Each school corporation may receive and accept bequests and donations for immediate use or as trusts or endowments to assist in meeting costs and expenses incurred in complying with the requirements of this section. When funds for the full payment of these the expenses are not otherwise available in any a school corporation, any an unexpended balance in the state treasury which that is available



for the use of local schools and is otherwise unappropriated may be loaned to the school corporation for that purpose by the governor. Any A loan made by the governor under this section shall be repaid to the fund in the state treasury from which it the loan came within not more than two (2) years after the date it was advanced. These Loans under this section shall be repaid through the levying of taxes in the borrowing school corporation.

[20-8.1-7-19] Sec. 16. Sec. 19. A test to determine postural defects shall be administered to each public school student in the fifth, seventh, and ninth grades grade 5, grade 7, and grade 9. The state department of health may recommend procedures and guidelines for the administration of this section.

[20-8.1-7-21] Sec. 17. Sec. 21. (a) The state board of education shall provide information stressing the moral aspects of abstinence from sexual activity in any literature that it distributes to schoolchildren students and young adults concerning available methods for the prevention of acquired immune deficiency syndrome (AIDS). Such The literature must state that the best way to avoid AIDS is for young people to refrain from sexual activity until they are ready as adults to establish, in the context of marriage, a mutually faithful monogamous relationship.

- (b) The state board of education may not distribute AIDS literature described in subsection (a) to schoolchildren students without the consent of the governing body of the school corporation the schoolchildren students attend.
- [20-8.1-7-22] Sec. 18. Sec. 22. (a) This section does not apply to medication possessed by a student for self-administration under $\frac{1C}{20-8.1-5.1-7.5}$. IC 20-33-10-7.5.
- (b) Except as provided in subsection (d), a school corporation may not send home with a student medication that is possessed by a school for administration during school hours or at school functions.
- (c) Medication that is possessed by a school for administration during school hours or at school functions for a student in grades kindergarten through grade 8 may be released only to:
 - (1) the student's parent; or
 - (2) an individual who is:
 - (A) at least eighteen (18) years of age; and
 - (B) designated in writing by the student's parent to receive the medication.
- (d) A school corporation may send home medication that is possessed by a school for administration during school hours or at school functions with a student in grades 9 through 12 if the student's parent provides written permission for the student to receive the medication.
- [20-8.1-8-1] Sec. 19. Sec. 1. Eye Protective Devices. Every pupil (a) Each public school student and teacher in every public school shall



wear industrial quality eye protective devices at all times while participating in any of the following courses:

- (a) (1) Vocational or industrial arts shops or laboratories involving experience with:
 - (1) (A) hot molten metals;

- (2) (B) milling, sawing, turning, shaping, cutting, or stamping of any solid material;
- (3) (C) heat treatment, tempering, or kiln firing of any metal or material;
- (4) (D) gas or electric arc welding;
- (5) (E) repair or servicing of any vehicle; or
- (6) (F) caustic or explosive materials.
- (b) (2) Chemical or combined chemical-physical laboratories involving caustic or explosive chemicals or hot liquids or solids.
- (b) Eye protective devices are of industrial quality if they the devices meet the standards of the American standard safety code for head, eye, and respiratory protection, Z2.1-1959, promulgated by the American Standards Association, Inc. [QUERY: IS THE AMERICAN STANDARDS ASSOC. NOW THE AMERICAN NATIONAL STANDARDS INSTITUTE AND THE NEW STANDARD ANSI Z87.1-2003?]
- [20-8.1-8-2] Sec. 20. Sec. 2. (a) The governing body of a school corporation shall require each school in its the governing body's jurisdiction to conduct periodic fire drills during the school year in compliance with rules adopted under IC 4-22-2 by the state board. of education.
- (b) The governing body of a school corporation shall require each principal to file a certified statement that fire drills have been conducted as required under this section.

Chapter 4. Immunizations

- [20-8.1-7-9] Sec. 1. Sec. 9. (a) Each school shall keep an immunization record of its the school's students. The records shall must be kept uniformly throughout the state Indiana according to procedures prescribed by the state department of health.
- (b) When a student transfers to another school, the school from which the student is transferring may furnish, not more later than twenty (20) days after the transfer, a copy of the student's immunization record to the school to which the student is transferring.
- (c) When a student is enrolled enrolls in a postsecondary institution (as defined in IC 20-12-71-8), the school from which the student graduated may furnish a copy of the student's immunization record to the postsecondary institution. If the student is enrolled in a postsecondary institution while still attending a secondary level school, the secondary level school that the student is attending may furnish a copy of the student's immunization record to the postsecondary institution.



1	[20-8.1-7-9.5(a), (b), (c), (d)] Sec. 2. Sec. 9.5. (a) Every child
2	residing in Indiana shall be immunized against:
3	(1) diphtheria;
4	(2) pertussis (whooping cough);
5	(3) tetanus;
6	(4) measles;
7	(5) rubella;
8	(6) poliomyelitis; and
9	(7) mumps.
10	(b) Every child residing in Indiana who enters kindergarten or grade
11	1 shall be immunized against hepatitis B and chicken pox.
12	(c) The state department of health may expand or otherwise modify
13	the list of communicable diseases that require documentation of
14	immunity as medical information becomes available that would warrant
15	the expansion or modification in the interest of public health.
16	(d) The state department of health shall adopt rules under IC 4-22-2
17	specifying the:
18	(1) required immunizations;
19	(2) child's age for administering each vaccine;
20	(3) adequately immunizing doses; and
21	(4) method of documentation of proof of immunity.
22	[20-8.1-7-9.5(e)] Sec. 3. (e) Each school shall notify each parent of
23	a child student who enrolls in the school of the requirement that the
24	child student must be immunized and that the immunization is
25	required for the child's student's continued enrollment, attendance, or
26	residence at the school unless:
27	(1) the parent or child student provides the appropriate
28	documentation of immunity;
29	(2) for chicken pox, the parent or child student provides a written
30	signed statement that the child student has indicated a history of
31	chicken pox; or
32	(3) section 2 or 2.5 of this chapter IC 20-34-3-2 or IC 20-34-3-3
33	applies.
34	[20-8.1-7-9.6] Sec. 4. Sec. 9.6. (a) The parent of any child student
35	who has not received the required immunizations required under this
36	chapter shall present the child student to a physician and request the
37	physician to administer the immunizations. If the parent is unable to
38	secure the immunizations, the local health department serving the area
39	in which the child student resides may provide the immunizations.
40	These Vaccines provided by the local health department shall be
41	furnished by the local health board or the state department of health
42	from available supplies.
43	(b) The physician who administers the required vaccines to a child

PD 3770/DI 71 2005

student shall give a certificate or other documentation of the

immunizations to the person individual who presented the child

student for immunization. This certificate or other documentation shall

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be presented on request to the local health department or its the local health department's authorized representative.

[20-8.1-7-10.1] Sec. 5. Sec. 10.1. (a) Each school shall require the parents parent of a child student who has enrolled in the school to furnish no not later than the first day of school a written statement of the child's student's immunization, accompanied by the physician's certificates or other documentation, unless a written statement of this nature is on file with the school.

- (b) The statement must show, except for a child covered by student to whom section 2 IC 20-34-3-2 or 2.5 of this chapter IC 20-34-3-3 applies, that the child student has been immunized as required under section 9.5 section 2 of this chapter. The statement must include the child's student's date of birth and the date of each immunization.
- (c) A child student may not be permitted to attend school beyond the first day of school without furnishing this the written statement, unless:
 - (1) the school gives the parent of the child student a waiver; or
 - (2) the local health department or a physician determines that the child's student's immunization schedule has been delayed due to extreme circumstances and that the required immunizations will not be completed before the first day of school.

The waiver referred to in subdivision (1) may not be granted for a period that exceeds twenty (20) days. If subdivision (2) applies, the parent of the **child student** shall furnish the written statement and a time schedule, approved by a physician or the local health department, for the completion of the remainder of the immunizations.

- (d) The state department of health may commence an action against a school under IC 4-21.5-3-6 or IC 4-21.5-4 for the issuance of an order of compliance for failure to enforce this section.
- (e) Neither a religious objection under section 2 of this chapter IC 20-34-3-2 nor an exception for the child's student's health under section 2.5 of this chapter shall relieve any IC 20-34-3-3 relieves a parent from the reporting requirements imposed under this section.
- (f) The state department of health shall adopt rules under IC 4-22-2 to implement this section.
- [20-8.1-7-11] Sec. 6. Sec. 11: (a) Not later than sixty (60) days after the enrollment of children students for the first time and when additional immunizations are required by statute or rule, each school shall file a written report with the state department of health and the local health department having jurisdiction. The report shall must include the following:
 - (1) A statement of the number of children students who have demonstrated immunity against diphtheria, pertussis (whooping cough), tetanus, measles, rubella, poliomyelitis, mumps, and hepatitis B.



(2) A statement of the number of children students who have not demonstrated immunity against the illnesses listed in subdivision (1).

- (3) A statement of the number of children students who have been found positive for sickle cell anemia and lead poisoning.
- (b) The state department of health and the local health department shall, for good cause shown that there exists a substantial threat to the health and safety of a student or the school community, be able to validate immunization reports by onsite reviews or examinations of nonidentifying immunization record data. This section does not independently authorize the state department of health, a local department of health, or an agent of the state **department of health** or local department of health to have access to identifying medical or academic record data of individual students attending nonaccredited nonpublic schools.
- (c) A report shall also be filed [QUERY: BY WHOM?] for each child student who enrolls subsequent to the filing of the report for children students who enrolled at the beginning of the school year. The state department of health shall have has exclusive power to adopt rules for the administration of this section.
- [20-8.1-7-9.5(f)] Sec. 7. (f) After June 30, 2005, every child (a) **Each student** in Indiana who enters grade 9 and grade 12 shall be immunized against hepatitis B. However, a child student may not be prevented from enrolling in, attending, or graduating from high school for the sole reason that the child student has not been immunized under this subsection. section.
- **(b)** Beginning in the 2007-2008 school year, a high school is not required to notify each parent of a **child student** enrolled to enter grade 9 of the immunization requirement in this **subsection**. **section**.
- (c) The exceptions in sections 2 IC 20-34-3-2 and 2.5 of this chapter IC 20-34-3-3 apply to this subsection.
 - (d) This subsection section expires July 1, 2008.

